



by Karen Stephens

Bedwetting: What, Why, and Helpful Ways to Respond

Bedwetting, or enuresis as the doctors call it, is a very common experience for children, especially those younger than age six years. But for some, bedwetting — occasional or nightly — can last through elementary school years.

Bedwetting really is a normal part of children's development. It is inconvenient, and requires lots of patience on the part of children and parents; but it is typically outgrown by age eight.

As you can guess, the issue of bedwetting is sensitive, frustrating, confounding, and can be embarrassing to parents and children alike. Due to its very personal nature, if bedwetting is responded to inappropriately, children's self esteem, confidence, and family closeness take a terrible blow. If children are ridiculed or punished for bedwetting, they develop a severe sense of failure and shame. Those emotions don't help children control bedwetting, nor do they build trust; they make matters worse.

Ironically, doctors still aren't sure why bedwetting haunts some kids and not others. A genetic pattern does exist. Parents and older siblings often have a history of childhood bedwetting, too.

Bedwetting is usually not a sign that a child has deep-seated emotional or psychological problems, or even physical ones. However, short-term bedwetting might result from stressful changes in a child's life, such as a family divorce, move to new home, or entry into a new child care setting.

The bottom line *in most bedwetting cases* is that either a child sleeps much too deeply to wake up, or the child's brain just hasn't learned *how to wake* the body to reach the toilet in time. In fact, some children say they "dream" of using the toilet, and thus wet the bed thinking they are in the right place. They are just too far into dreamland to tell the difference.

A lot of "sometimes-true" information surrounds the bedwetting issue. For instance, for some children, limiting liquid intake prior to bedtime helps fend off bedwetting. But for most, it does not. And so well-meaning parents limit fluids too much and dehydrate children who still end up bedwetting. Reminding children every night to use the toilet prior to bedtime doesn't reliably stop bedwetting. And promises of special treats, prizes, stickers, or "just you and me" experiences do little to help children master nighttime dryness.

The good news is that *most* children outgrow bedwetting all on their own. As children mature, they gain night-time control over their bladder without any special treatment or routine devised by parents or doctors. Until that time arrives, keep these strategies in mind so you respond to children with sensitive support.

Supportive Responses to Bedwetting

- Reassurance, compassion and patience are great parenting skills to put into action when children wrestle with bedwetting. Children don't wet beds on purpose, so remind them you understand they aren't bedwetting intentionally. Avoid blaming children for laziness or forgetfulness; those are

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not bedwetting causes. Most children desperately want to avoid bedwetting. Making character judgments can undermine rather than nurture progress.

- Keep bedwetting in perspective: it's just one part of a child and family's life and shouldn't take center-stage. If a child feels overly-pressured to sleep dry, then every "wet" morning begins with failure and a disappointment that lingers all day.
- Remain calm when a child bed wets. For compassion and practicality, use a rubber lining under sheets to make bed cleaning easier.
- So children can contribute to their own care, teach them to help change their sheets, put them in the washer, and put on new sheets. Don't make a major production of this by alerting the whole family to the routine. Requiring children to help remedy the consequences of a wet bed should never be for punishment, but to deal with reality. It can also help insure children's privacy among siblings, cousins, or house guests.
- Express confidence in your child's ability to outgrow bedwetting. Never allow siblings, cousins or friends to name-call or tease about bedwetting. Refuse to allow demeaning treatment.
- Share your child's bedwetting information confidentially on an "as needed" basis. For instance, if your child is still enrolled in child care during naptime, let staff know that wetting may occur. Provide a rubber liner for a cot if the program doesn't own one. Explain how you respond to your child's wetting incidents and ask that program staff respond in the same manner.

Should the Doctor See Your Child? Significant patterns and details to notice

When determining if a physical condition is causing your child's bedwetting, take note of the details listed below. If one or more of these conditions exist, a trip to the doctor could help solve bedwetting by treating physical causes.

- Is your child age seven years or older?
- Was your child night-time dry for a long period (6 months) and then began bedwetting again?
- Does your child urinate frequently during the day as well as during nighttime? (This could suggest bladder infection or diabetes.)
- Has the amount or appearance of your child's urine changed recently? How?
- Does your child describe urination pain or stinging suggestive of urinary track infection?
- Is your child experiencing illness symptoms, such as fever or vomiting?
- Has your child recently endured severe stress?
- Has bedwetting significantly affected how your child views social opportunities, such as invitations to spend the night with a friend or a chance for a vacation trip? Does the condition agitate your child and significantly affect his/her attitude and self esteem?

When you need help with bedwetting, turn to pediatricians and trusted relatives or early childhood professionals. You can also review credible resources on children's bedwetting. The book *Dry All Night: The Picture Book Technique that Stops Bedwetting* by Alison Mack (New York: Little, Brown, 1990) and *Waking Up Dry: A Guide to Help Children Overcome Bedwetting* by Howard J. Bennet (Elk Grove Village, NY: American Academy of Pediatrics, 2005) are frequently recommended.

However, be very wary of purchasing unproven products of questionable authority. Advertisers do sell specialized products — often high priced — that promise far more effective results in stopping bedwetting than they can deliver. Patience, rather than products, is more often the best coping strategy.

About the Author — Karen Stephens is director of Illinois State University Child Care Center and instructor in child development for the ISU Family and Consumer Sciences Department. For nine years she wrote a weekly parenting column in her local newspaper. Karen has authored early care and education books and is a frequent contributor to *Exchange*.

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